

Law Enforcement and TxDOT Use ONLY

☐ FATAL ☐ CMV ☐ SCHOOL BUS ☐ RAILROAD ☐ MAB ☐ SUPPLEMENT ☐ ACTIVE SCHOOL ZONE

Texas Peace Officer's Crash Report (Form CR-3 11/2015)

| | | | | | |
|------------------|---|-------------------|---|----------------|---------------------------|
| Total Num. Units | 1 | Total Num. Prsns. | 2 | TxDOT Crash ID | 14873796.1 72016029563 |
|------------------|---|-------------------|---|----------------|---------------------------|

Mail to: Texas Department of Transportation, Crash Data & Analysis, P.O. Box 149349, Austin, TX 78714. Questions? Call (844) 274-7457

Refer to Attached Code Sheet for Numbered Fields

*= These fields are required on all additional sheets submitted for this crash (ex: additional vehicles, occupants, injured etc.)

Page 1 of 3

| | | | | | | | | | | | | | |
|---|--|-------------|--|-----------------------|--|---|--|---|--|---------------------------------|--|---|--|
| * Crash Date (MM/DD/YYYY) | | 01/03/2016 | | * Crash Time (24HRMM) | | 0721 | | Case ID | | C1600026 | | Local Use | |
| * County Name | | | | | | * City Name | | | | | | <input type="checkbox"/> Outside City Limit | |
| In your opinion, did this crash result in at least \$1,000 damage to any one person's property? | | | | | | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | | Latitude (decimal degrees) | | Longitude (decimal degrees) | | | |
| ROAD ON WHICH CRASH OCCURED | | | | | | | | | | | | | |
| * 1 Rdw. Sys. | | LR | | * Hwy. Num. | | 2 Rdw. Part | | 1 | | Block Num. | | 817 | |
| 3 Street Prefix | | | | * Street Name | | HORNE | | 4 Street Suffix | | RD | | | |
| <input type="checkbox"/> Crash Occurred on a Private Drive or Road/Private Property/Parking Lot | | | | | | <input type="checkbox"/> Toll Road/Toll Lane | | Speed Limit | | 35 | | Const. Zone <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| Workers Present <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | | | | | Street Desc | | | | | | | |
| INTERSECTING ROAD, OR IF CRASH NOT AT INTERSECTION, NEAREST INTERSECTING ROAD OR REFERENCE MARKER | | | | | | | | | | | | | |
| At Int. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | 1 Rdw. Sys. | | LR | | Hwy. Num. | | 2 Rdw. Part | | 1 | | Block Num. | |
| 4 Street Suffix | | | | 3 Street Prefix | | | | Street Name | | BARRERA | | 4 Street Suffix | |
| DR | | | | | | | | | | | | | |
| Distance from Int. or Ref. Marker | | | | 50 | | | | <input checked="" type="checkbox"/> FT <input type="checkbox"/> MI | | 3 Dir. from Int. or Ref. Marker | | E | |
| Reference Marker | | | | | | | | Street Desc. | | RRX Num. | | | |
| Unit Num. | | 1 | | 5 Unit Desc. | | 1 | | <input type="checkbox"/> Parked Vehicle <input checked="" type="checkbox"/> Hit and Run | | LP State | | TX | |
| LP Num. | | CX9H331 | | VIN | | K N A F E 1 2 1 3 5 5 1 7 6 5 8 6 | | | | | | | |
| Veh. Year | | 2005 | | 6 Veh. Color | | GLD | | Veh. Make | | KIA MOTORS | | Veh. Model | |
| SPECTRA | | | | 7 Body Style | | P4 | | <input type="checkbox"/> Pol. Fire, EMS on Emergency (Explain in Narrative if checked) | | | | | |
| 8 DL/ID Type | | 1 | | DL/ID State | | TX | | DL/ID Num. | | 38855291 | | 9 DL Class | |
| C | | | | 10 CDL End. | | 96 | | 11 DL Rest. | | 96 | | DOB (MM/DD/YYYY) | |
| 01/19/1995 | | | | | | | | | | | | | |
| Address (Street, City, State, ZIP) | | | | | | | | | | | | | |
| 3614 CUB ST, CORPUS CHRISTI, TX 78405 | | | | | | | | | | | | | |
| Person Num. | | 1 | | 12 Psm. Type | | 1 | | 13 Seat Position | | 1 | | Name: Last, First, Middle | |
| Enter Driver Or Primary Person for this Unit on first line | | | | | | | | | | | | 14 Injury Severity | |
| N | | 20 | | H | | 1 | | 17 Elect. | | 1 | | 18 Restr. | |
| 1 | | 1 | | 1 | | 1 | | 19 Airbag | | 1 | | 20 Helmet | |
| 97 | | N | | 96 | | | | 22 Alc. Spec. | | 96 | | 23 Drug Spec. | |
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| | | | | | | | | 166 Drug Result | | | | | |

Case ID **C1600026**

TxDOT Crash ID

Page **2** of **3**

| DISPOSITION OF INJURED/KILLED | Unit Num. | Prsn. Num. | Taken To | Taken By | Date of Death (MM/DD/YYYY) | Time of Death (24HRMM) |
|----------------------------------|--------------|---------------|----------|----------|-------------------------------|---------------------------|
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| CHARGES | Unit Num. | Prsn. Num. | Charge | Citation/Reference Num. |
|---------|--------------|---------------|--|-------------------------|
| | 1 | 1 | UNSAFE CHANGE FROM A DIRECT COURSE | 016160 |
| | 1 | 1 | FAIL TO REMAIN AND REPORT AN ACCIDENT | 016160 |
| | 1 | 1 | FAIL TO MAINTAIN FINANCIAL RESPONSIBILITY | 016160 |

| DAMAGE | Damaged Property Other Than Vehicles | Owner's Name | Owner's Address |
|--------|--------------------------------------|--------------|-----------------|
| | | | |

| | | | | | |
|----------------------|---|--|--|--------------------|---|
| Unit Num. | <input type="checkbox"/> 10,001+ LBS. <input type="checkbox"/> TRANSPORTING HAZARDOUS MATERIAL <input type="checkbox"/> 9+ CAPACITY | CMV Disabling Damage? Yes <input type="checkbox"/> No <input type="checkbox"/> | 28 Veh. Oper. | 29 Carrier ID Type | Carrier ID Num. |
| Carrier's Corp. Name | Carrier's Primary Addr. | | | | 30 Veh. Type |
| 31 Bus Type | <input type="checkbox"/> RGWW <input type="checkbox"/> GVWR | HazMat Released <input type="checkbox"/> Yes <input type="checkbox"/> No | 32 HazMat Class Num. | 32 HazMat ID Num. | 32 HazMat Class Num. |
| Trailer Unit Num. | <input type="checkbox"/> RGWW <input type="checkbox"/> GVWR | 34 Trlr. Type | CMV Disabling Damage? Yes <input type="checkbox"/> No <input type="checkbox"/> | Trailer Unit Num. | <input type="checkbox"/> RGWW <input type="checkbox"/> GVWR |
| Sequence Of Events | 35 Seq. 1 | 35 Seq. 2 | 35 Seq. 3 | 35 Seq. 4 | |

| FACTORS & CONDITIONS | 36 Contributing factors (Investigator's Opinion) | | | | 37 Vehicle Defects (Investigator's Opinion) | | | | Environmental and Roadway Conditions | | | | | |
|----------------------|--|--------------|-------------------|--|---|-------------------|--|--|--------------------------------------|----------------|-------------------|-----------------|----------------------|----------------------|
| | Unit Num. | Contributing | May Have Contrib. | | Contributing | May Have Contrib. | | | 38 Weather Cond. | 39 Light Cond. | 40 Entering Roads | 41 Roadway Type | 42 Roadway Alignment | 43 Surface Condition |
| | 1 | 22 | 23 | | | | | | 2 | 1 | 97 | 1 | 4 | 2 |

| | | | |
|--|--|----------------|------------------------------|
| Investigator's Narrative Opinion of What Happened (Attach Additional Sheets If Necessary) | | Indicate North | Field Diagram - Not to Scale |
| <p>On Sunday 1-3-16 at about 0728 hours I, A120 S/O R. Cruz 8412 was dispatched to the area of Horne Rd. and Barrera Dr. in reference to a single vehicle major traffic crash.</p> <p>Upon arrival I observed Veh1- a tan 2005 Kia Spectra Tx. CX9-H331 had left the West bound roadway and jumped the curb at about 817 Horne Rd. Veh1 struck a brown AEP power line pole. The pole was located on the Gabe Lozano golf course side of the roadway. The pole that was struck was broken in two pieces and was hanging over the Horne Rd. West bound right lane. The next brown power line pole just West of the broken one was not struck, but was bent and also leaning toward the Horne Rd. West bound right lane.</p> <p>I observed David Sandoval (18 years old) standing next to the rear area of Veh1 speaking to CCFD medics. Medics informed me when the arrived, David was crawling over</p> | | | |

| | | | | | | | | |
|--------------|---|-----------------------------|-------------------|-----------------|-----------------------|-------------------|---|-------------------|
| INVESTIGATOR | Time Notified (24HRMM) | 0728 | How Notified | DISPATCH | Time Arrived (24HRMM) | 0731 | Report Date (MM/DD/YYYY) | 01/03/2016 |
| | Invest. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Investigator Name (Printed) | CRUZ, RENE | | | | ID Num. | 8412 |
| | ORI Num. | TX1780200 | | | | * Agency | CORPUS CHRISTI POLICE DEPARTMENT | |
| | | | | | | Service/Region/DA | A | |

Case ID **C1600026**

TxDOT Crash ID

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* Crash Date
(MM/DD/YYYY) **01/03/2016**

* Crash Time
(24HRMM) **0721**

* County
Name **NUECES**

* City
Name **CORPUS CHRISTI**

* 1 Rdwy.
Sys. **LR**

* Hwy.
Num.

* Street
Name **HORNE**

ORI
Num. **TX1780200**

* Agency **CORPUS CHRISTI POLICE DEPARTMENT**

Service/
Region/DA

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NARRATIVE CONTINUATION

from the front passengers seat side to exit Vehl through the drivers door. I observed David had a large red bump with scratch marks on his top left forehead area. I also observed both of David's hands had some minor bleeding, possibly due to the shattered glass from Vehl. David appeared a little dazed and shook up. David declined Medical transport.

I spoke to David and he stated that he and his cousin SU1- Carlos Hernandez went last night to Carlos's friends house for a little get together. David stated it was close by but he did not know the address. David stated they had been drinking Budweiser beer. David stated that he and Carlos had just left the friend's house. David stated Carlos was driving Vehl and he was the front seat passenger. David stated that they were driving West on Horne Rd. and that all of a sudden Carlos crashed. David stated he hit his head on something and had become dizzy. David stated Carlos exited the drivers door and left the accident scene by running away. David stated his front passengers door was stuck and would not open.

Carlos left David in Vehl and did not attempt to stay and render aid. Carlos did not call Police or make an attempt to go by a near by house and get help for David who was still in Vehl when Carlos left running.

Several minutes later, Santos Lopez arrived and stated his son Carlos had just called him and told him he had been in a crash. Santos looked at Vehl and confirmed it belonged to Carlos. Santos then gave David a ride home.

I observed a 12oz Budweiser beer bottle that had beer spilling out of it on the front passengers side floorboard area. I also observed a brown wallet on the drivers side floorboard area that contained Carlos Hernandez's drivers license. (The wallet was tagged and placed in the CCPD property room by S/O Bruns).

Vehl was impounded and a hold was authorized by Lt. Fraizer.

Photos taken by S/O Bruns.

Investigator
Name (Printed)

CRUZ, RENE

ID
Num.

8412

Department

CCPD

Service/
Region/DA

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Texas Peace officer's Crash Report - Code Sheet

Numbered Fields on the CR-3 Refer to the Numbered Lists on this Code Sheet. Each list includes the codes that may be entered on the form and the description of each code.

Page 1 of 2
Law Enforcement and TxDOT Use ONLY.
Form CR-3CS 1/1/2015

| 1. Roadway System | | 2. Roadway Part | | 3. Street Prefix, Direction from Int. or Ref. Marker | | 4. Street Suffix | |
|--------------------------|---|-----------------------------------|--|--|------------------|-------------------|--|
| IH = Interstate | TL = Toll Road | 1 = Main/Proper Lane | | N = North | RD = Road | LOOP = Loop | |
| US = US Highway | AL = Alternate | 2 = Service/Frontage Road | | NE = Northeast | ST = Street | EXPY = Expressway | |
| SH = State Highway | SP = Spur | 3 = Entrance/On Ramp | | E = East | DR = Drive | CT = Court | |
| FM = Farm to Market | CR = County Road | 4 = Exit/Off Ramp | | SE = Southeast | AVE = Avenue | CIR = Circle | |
| RR = Ranch Road | PV = Private Road | 5 = Connector/Flyover | | S = South | BLVD = Boulevard | PL = Place | |
| RM = Ranch to Market | RC = Recreational Road | 98 = Other (Explain in Narrative) | | SW = Southwest | PKWY = Parkway | PARK = Park | |
| BI = Business Interstate | LR = Local Road/Street | | | W = West | LN = Lane | CV = Cove | |
| BU = Business US | (Street, Road, Ave., Blvd., Pl., Trl., Beach, Alley, Boat Ramp, etc.) | | | NW = Northwest | FWY = Freeway | | |
| BS = Business State | | | | | HWY = Highway | | |
| BF = Business FM | | | | | WAY = Way | | |
| SL = State Loop | | | | | TRL = Trail | | |

| 5. Unit Description | | 6. Vehicle Color | | 7. Body Style | | 8. Driver License/ID Type | | 9. Driver License Class | | 10. Commercial Driver License Endorsements | |
|-----------------------------------|--|--------------------|-----------------------------------|----------------------------|-----------------------------------|---------------------------|-------------------------|-------------------------|------------------------------|--|--|
| 1 = Motor Vehicle | | BGE = Beige | PNK = Pink | P2 = Passenger Car, | PC = Police Car/ | 1 = Driver License | A = Class A | | H = Hazardous Materials | | |
| 2 = Train | | BLK = Black | PLE = Purple | 2-Door | Truck | 2 = Commercial | AM = Class A and M | | N = Tank Vehicles | | |
| 3 = Pedalcyclist | | BLU = Blue | RED = Red | P4 = Passenger Car, | PM = Police | 3 = Occupational | B = Class B | | P = Passengers | | |
| 4 = Pedestrian | | BRZ = Bronze | SIL = Silver | 4-Door | Motorcycle | 4 = ID Card | BM = Class B and M | | S = School Bus | | |
| 5 = Motorized Conveyance | | BRO = Brown | TAN = Tan | PK = Pickup | TL = Trailer, Semi- | 5 = Unlicensed | C = Class C | | T = Double/Triple Trailer | | |
| 6 = Towed/Trailer | | CAM = Camouflage | TEA = Teal (green) | AM = Ambulance | Trailer, or Pole | 98 = Other | CM = Class C and M | | X = Tank Vehicle with HazMat | | |
| 7 = Non-Contact | | CPR = Copper | TRQ = Turquoise (blue) | BU = Bus | Trailer | 99 = Unknown | M = Class M | | 5 = Unlicensed | | |
| 98 = Other (Explain in Narrative) | | GLD = Gold | WHI = White | SB = Yellow School Bus | TR = Truck | | 5 = Unlicensed | | 96 = None | | |
| | | GRY = Gray | YEL = Yellow | FE = Farm Equipment | TT = Truck Tractor | | 98 = Other/Out of State | | 98 = Other/Out of State | | |
| | | GRN = Green | 98 = Other (Explain in Narrative) | FT = Fire Truck | VN = Van | | 99 = Unknown | | 99 = Unknown | | |
| | | MAR = Maroon | | MC = Motorcycle | 98 = Other (Explain in Narrative) | | | | | | |
| | | MUL = Multicolored | | SV = Sport Utility Vehicle | 99 = Unknown | | | | | | |
| | | ONG = Orange | 99 = Unknown | | | | | | | | |

| 11. Driver License Restrictions | | 12. Person Type | | 13. Seat Position | | 14. Injury Severity | | 15. Ethnicity | | 16. Sex | | 17. Ejected | | 18. Restraint Used | | 19. Airbag | |
|---|--|---|--|------------------------|--|-------------------------------|--|---------------------------------|--|--------------|--|---------------------|-------------------------|--------------------------------|---------------------|------------------------|--|
| A = With corrective lenses | | 1 = Driver | | 1 = Front Left | 10 = Cargo Area | A = Incapacitating Injury | | W = White | | 1 = Male | | 1 = No | | 1 = Shoulder and Lap Belt | | 1 = Not Deployed | |
| B = LOFS 21 or over | | 2 = Passenger/Occupant | | 2 = Front Center | 11 = Outside Vehicle | B = Non-Incapacitating Injury | | B = Black | | 2 = Female | | 2 = Yes | | 2 = Shoulder Belt Only | | 2 = Deployed, Front | |
| C = Daytime only | | 3 = Pedalcyclist | | 3 = Front Right | 13 = Other in Vehicle | C = Possible Injury | | H = Hispanic | | 99 = Unknown | | 3 = Yes, Partial | | 3 = Lap Belt Only | | 3 = Deployed, Side | |
| D = Not to exceed 45 MPH | | 4 = Pedestrian | | 4 = Second Seat Left | 14 = Passenger in Bus | K = Killed | | A = Asian | | | | 97 = Not Applicable | | 4 = Child Seat, Facing Forward | | 4 = Deployed, Rear | |
| E = No expressway driving | | 5 = Driver of Motorcycle Type Vehicle | | 5 = Second Seat Center | 16 = Pedestrian, Pedalcyclist, or Motorized Conveyance | N = Not Injured | | I = Amer. Indian/Alaskan Native | | | | 99 = Unknown | | 5 = Child Seat, Facing Rear | | 5 = Deployed, Multiple | |
| F = Must hold valid learner lic to MM/DD/YY | | 6 = Passenger/Occupant on Motorcycle Type Vehicle | | 6 = Second Seat Right | 98 = Other (Explain in Narrative) | 99 = Unknown | | 98 = Other | | | | | 6 = Child Seat, Unknown | | 97 = Not Applicable | | |
| G = TRC 545.424 applies until MM/DD/YY | | 98 = Other (Explain in Narrative) | | 7 = Third Seat Left | 99 = Unknown | | | 99 = Unknown | | | | | | | | | |
| H = Vehicle not to exceed 26,000 lbs GVWR | | | | 8 = Third Seat Center | | | | | | | | | | | | | |
| I = MC not to exceed 250 CC | | | | 9 = Third Seat Right | | | | | | | | | | | | | |
| J = Licensed MC operator 21 or over in sight | | | | | | | | | | | | | | | | | |
| K = Moped | | | | | | | | | | | | | | | | | |
| L = Vehicle without airbrakes | | | | | | | | | | | | | | | | | |
| M = CDL Intrastate only | | | | | | | | | | | | | | | | | |
| N = Ignition interlock required | | | | | | | | | | | | | | | | | |
| O = Occ./Essent. need DL-No CMV-see court order | | | | | | | | | | | | | | | | | |
| Q = LOFS 21 or over vehicle above Class B | | | | | | | | | | | | | | | | | |
| R = LOFS 21 or over vehicle above Class C | | | | | | | | | | | | | | | | | |

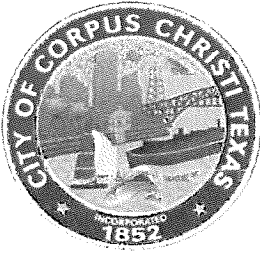
| 20. Helmet Use | | 21. Solicitation | | 22. Alcohol Specimen Type | | 23. Drug Specimen Type | | 24. Drug Test Result | | 25. Drug Category Type | | 26. Financial Responsibility Type | | 27. Vehicle Damage Rating | |
|-----------------------|--|------------------|--|-----------------------------------|--|-----------------------------------|--|-----------------------------------|--|--|--|--|--|---|--|
| 1 = Not Worn | | Y = Solicit | | 1 = Breath | | 2 = Blood | | 1 = Positive | | 2 = CNS Depressants | | 1 = Liability Insurance Policy | | <p>In most cases, enter in the format XX-ABC-Y, where XX is the Direction of Force (1-12), ABC is the Damage Description 2- or 3-letter code, and Y is the Damage Severity (0-7).</p> <p>In special cases, use: VB-1 = vehicle burned, NOT due to collision VB-7 = vehicle catches fire due to the collision TP-0 = top damage only VX-0 = undercarriage damage only MC-1 = motorcycle, moped, scooter, etc. NA = Not Applicable (Farm Tractor, etc.)</p> | |
| 2 = Worn, Damaged | | N = No Solicit | | 2 = Blood | | 3 = Urine | | 2 = Negative | | 3 = CNS Stimulants | | 2 = Proof of Liability Insurance | | | |
| 3 = Worn, Not Damaged | | | | 3 = Urine | | 4 = Refused | | 97 = Not Applicable | | 4 = Hallucinogens | | 3 = Insurance Binder | | | |
| 4 = Worn, Unk. Damage | | | | 4 = Refused | | 96 = None | | 98 = Other (Explain in Narrative) | | 6 = Narcotic Analgesics | | 4 = Surety Bond | | | |
| 97 = Not Applicable | | | | 96 = None | | 98 = Other (Explain in Narrative) | | 99 = Unknown | | 7 = Inhalants | | 5 = Certificate of Deposit with Comptroller | | | |
| 99 = Unknown if Worn | | | | 98 = Other (Explain in Narrative) | | | | | | 8 = Cannabis | | 6 = Certificate of Deposit with County Judge | | | |
| | | | | | | | | | | 10 = Dissociative Anesthetics | | 7 = Certificate of Self-Insurance | | | |
| | | | | | | | | | | 11 = Multiple Drugs (Explain in Narrative) | | | | | |
| | | | | | | | | | | 97 = Not Applicable | | | | | |
| | | | | | | | | | | 98 = Other Drugs (Explain in Narrative) | | | | | |
| | | | | | | | | | | 99 = Unknown | | | | | |

Texas Peace Officer's Crash Report - Code Sheet

Numbered Fields on the CR-3 Refer to the Numbered Lists on this Code Sheet. Each list includes the codes that may be entered on the form and the description of each code.

Page 2 of 2
Law Enforcement and TxDOT Use ONLY.
Form CR-3CS 1/1/2015

| | | | | | |
|---------------------------------|---|--|--|--|---|
| COMMERCIAL MOTOR VEHICLE | 28. Vehicle Operation 1 = Interstate Commerce 2 = Intrastate Commerce 3 = Not in Commerce 4 = Government 5 = Personal | 29. Carrier ID Type. 1 = US DOT 2 = TxDOT 3 = ICC/MC 96 = None 98 = Other (Explain in Narrative) | 30. Vehicle Type 1 = Passenger Car 2 = Light Truck 3 = Bus (9-15) 4 = Bus (>15) 5 = Single Unit Truck 2 Axles 6 Tires 6 = Single Unit Truck 3 or More Axles 7 = Truck Trailer 8 = Truck Tractor (Bobtail) 9 = Tractor/Semi Trailer 10 = Tractor/Double Trailer 11 = Tractor/Triples Trailer 98 = Other (Explain in Narrative) 99 = Unknown Heavy Truck | 31. Bus Type 0 = Not a Bus 1 = School (Public or Private) 2 = Transit 3 = Intercity 4 = Charter 5 = Other 6 = Shuttle 9 = Not Reported/Unknown | 32. Hazardous Material Class Number 1 = Explosives 2 = Gases 3 = Flammable Liquids 4 = Flammable Solids 5 = Oxidizers and Organic Peroxides 6 = Toxic Materials and Infectious Substances 7 = Radioactive Materials 8 = Corrosive Materials 9 = Miscellaneous Dangerous Goods |
| | 33. Cargo Body Style 1 = Bus (9-15) 2 = Bus (>15) 3 = Van/Enclosed Box 4 = Cargo Tank 5 = Flatbed 6 = Dump 7 = Concrete 8 = Auto Transporter 9 = Garbage Refuse 10 = Grain Chips Gravel 11 = Pole 13 = Intermodal 14 = Logging 15 = Vehicle Towing Another Vehicle 97 = Not Applicable 98 = Other (Explain in Narrative) | | | 34. Trailer Type 1 = Full Trailer 2 = Semi-Trailer 3 = Pole Trailer | |
| | 35. Sequence of Events 1 = Non-Collision: Ran Off Road 2 = Non-Collision: Jackknife 3 = Non-Collision: Overturn Rollover 4 = Non-Collision: Downhill Runaway 5 = Non-Collision: Cargo Loss Or Shift 6 = Non-Collision: Explosion Or Fire 7 = Non-Collision: Separation of Units 8 = Non-Collision: Cross Median/Centerline 9 = Non-Collision: Equipment Failure 10 = Non-Collision: Other 11 = Non-Collision: Unknown 12 = Collision Involving Pedestrian 13 = Collision Involving Motor Vehicle In Transport 14 = Collision Involving Parked Motor Vehicle 15 = Collision Involving Train 16 = Collision Involving Pedalcycle 17 = Collision Involving Animal 18 = Collision Involving Fixed Object 19 = Collision With Work Zone Maintenance Equipment 20 = Collision With Other Movable Object 21 = Collision With Unknown Movable Object 98 = Other (Explain in Narrative) | | | | |
| FACTORS AND CONDITIONS | 36. Factors and Conditions 1 = Animal on Road - Domestic 2 = Animal on Road - Wild 3 = Backed without Safety 4 = Changed Lane when Unsafe 14 = Disabled in Traffic Lane 15 = Disregard Stop and Go Signal 16 = Disregard Stop Sign or Light 17 = Disregard Turn Marks at Intersection 18 = Disregard Warning Sign at Construction 19 = Distraction in Vehicle 20 = Driver Inattention 21 = Drove Without Headlights 22 = Failed to Control Speed 23 = Failed to Drive in Single Lane 24 = Failed to Give Half of Roadway 25 = Failed to Heed Warning Sign 26 = Failed to Pass to Left Safely 27 = Failed to Pass to Right Safely 28 = Failed to Signal or Gave Wrong Signal 29 = Failed to Stop at Proper Place 30 = Failed to Stop for School Bus 31 = Failed to Stop for Train 32 = Failed to Yield ROW - Emerge 33 = Failed to Yield ROW - Open Intersection 34 = Failed to Yield ROW - Private Drive 35 = Failed to Yield ROW - Stop Sign 36 = Failed to Yield ROW - To Pedestrian 37 = Failed to Yield ROW - Turning Left 38 = Failed to Yield ROW - Turn on Red 39 = Failed to Yield ROW - Yield Sign 40 = Fatigued or Asleep 41 = Faulty Evasive Action 42 = Fire in Vehicle 43 = Fleeing or Evading Police 44 = Followed Too Closely 45 = Had Been Drinking 46 = Handicapped Driver (Explain in Narrative) 47 = Ill (Explain in Narrative) 48 = Impaired Visibility (Explain in Narrative) 49 = Improper Start from Parked Position 50 = Load Not Secured 51 = Opened Door Into Traffic Lane 52 = Oversized Vehicle or Load 53 = Overtake and Pass Insufficient Clearance 54 = Parked and Failed to Set Brakes 55 = Parked in Traffic Lane 56 = Parked without Lights 57 = Passed in No Passing Lane 58 = Passed on Right Shoulder 59 = Pedestrian FTYROW to Vehicle 60 = Unsafe Speed 61 = Speeding - (Over Limit) 62 = Taking Medication (Explain in Narrative) 63 = Turned Improperly - Cut Corner on Left 64 = Turned Improperly - Wide Right 65 = Turned Improperly - Wrong Lane 66 = Turned when Unsafe 67 = Under Influence - Alcohol 68 = Under Influence - Drug 69 = Wrong Side - Approach or Intersection 70 = Wrong Side - Not Passing 71 = Wrong Way - One Way Road 73 = Road Rage 74 = Cell/Mobile Device Use - Talking 75 = Cell/Mobile Device Use - Texting 76 = Cell/Mobile Device Use - Other 77 = Cell/Mobile Device Use - Unknown 98 = Other (Explain in Narrative) | | | | |
| | 37. Vehicle Defects 5 = Defective or No Headlamps 6 = Defective or No Stop Lamps 7 = Defective or No Tail Lamps 8 = Defective or No Turn Signal Lamps 9 = Defective or No Trailer Brakes 10 = Defective or No Vehicle Brakes 11 = Defective Steering Mechanism 12 = Defective or Slick Tires 13 = Defective Trailer Hitch 98 = Other (Explain in Narrative) | 38. Weather Condition 1 = Clear 2 = Cloudy 3 = Rain 4 = Sleet/Hail 5 = Snow 6 = Fog 7 = Blowing Sand/Snow 8 = Severe Crosswinds 98 = Other (Explain in Narrative) 99 = Unknown | 39. Light Condition 1 = Daylight 2 = Dark, Not Lighted 3 = Dark, Lighted 4 = Dark, Unknown Lighting 5 = Dawn 6 = Dusk 98 = Other (Explain in Narrative) 99 = Unknown | 40. Entering Roads 2 = Three Entering Roads - T 3 = Three Entering Roads - Y 4 = Four Entering Roads 5 = Five Entering Roads 6 = Six Entering Roads 7 = Traffic Circle 8 = Cloverleaf 97 = Not Applicable 98 = Other (Explain in Narrative) | |
| | 41. Roadway Type 1 = Two-Way, Not Divided 2 = Two-Way, Divided, Unprotected Median 3 = Two-Way, Divided, Protected Median 4 = One-Way 98 = Other (Explain in Narrative) | 42. Roadway Alignment 1 = Straight, Level 2 = Straight, Grade 3 = Straight, Hillcrest 4 = Curve, Level 5 = Curve, Grade 6 = Curve, Hillcrest 98 = Other (Explain in Narrative) 99 = Unknown | 43. Surface Condition 1 = Dry 2 = Wet 3 = Standing Water 4 = Snow 5 = Slush 6 = Ice 7 = Sand, Mud, Dirt 98 = Other (Explain in Narrative) 99 = Unknown | 44. Traffic Control 2 = Inoperative (Explain in Narrative) 3 = Officer 4 = Flagman 5 = Signal Light 6 = Flashing Red Light 7 = Flashing Yellow Light 8 = Stop Sign 9 = Yield Sign 10 = Warning Sign 11 = Center Stripe/Divider 12 = No Passing Zone 13 = RR Gate/Signal 15 = Crosswalk 16 = Bike Lane 17 = Marked Lanes 18 = Signal Light With Red Light Running Camera 96 = None 98 = Other (Explain in Narrative) | |



State of Texas
County of Nueces

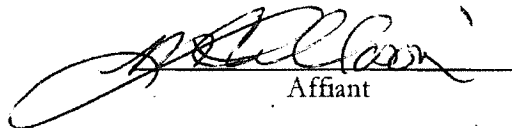
AFFIDAVIT

Before me, the undersigned authority, personally appeared Michelle Cullison, who, being by me duly sworn, deposed as follows:

My name is Michelle Cullison. I am of sound mind, capable of making this affidavit, and personally acquainted with the facts herein stated:

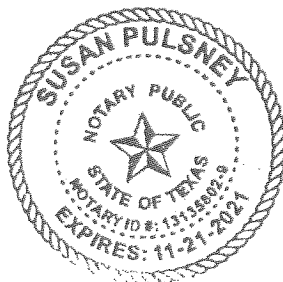
I am the custodian of the records of the Corpus Christi Police Department. Attached hereto are **5 pages** of records from the Corpus Christi Police Department. These **5 pages** of records are kept by the Corpus Christi Police Department in the regular course of business of the Corpus Christi Police Department, and it was the regular course of business of the Corpus Christi Police Department for an employee or representative of the Corpus Christi Police Department, with knowledge of the act, event, condition, opinion or diagnosis, recorded to make the record or to transmit information thereof to be included in such record; and the record was made at or near the time or reasonably soon thereafter. The records attached hereto are the original or exact duplicates of the original.

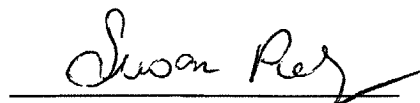
CCPD Records Requested: Accident report #C1600026


Affiant

State of Texas
County of Nueces

On this 20 day of February, 2018. I attest that the attached document(s) and the duplicate kept in my notarial records are true and exact copies made by me from the original document described as Corpus Christi Police Department Records, presented to me by the holder of the document, the Corpus Christi Police Department, and requested to be copied, and that, to the best of my ability to determine, the original document is neither a public record nor a publicly recordable document.




Notary Public, State of Texas